Codicil form

of address	
address	
declare this to be a first/second codicil to my W date of Will	/ill dated

In addition to any legacies given in my said Will I give to The Eden Trust, Bodelva, Cornwall PL24 2SG (charity number 1093070) the sum of:

£	amount		
or	S	pecific item	
or	amount	% share of my estate	

to be used for its general purposes and I declare that the receipt of the Treasurer or duly authorised officer shall be a full and sufficient discharge. In all other respects I confirm my said Will and any other Codicils thereto.

Signature

Date

Witnessed by:

Signature
Name
Address
Occupation
Date

Witnessed by:

Signature
Name
Address
Occupation
Date

Two witnesses are required in England, Wales and Northern Ireland; one witness in Scotland. Witnesses should be over 18 and should not be beneficiaries of the Will or Codicil(s).